

AFFIDAVIT OF KEITH SWIFT

NOW COMES KEITH SWIFT, and before a witness or duly authorized notary public, hereby swears and attests to the following as true and correct to the best of his knowledge, information and belief:

1. My name is Keith Labronzo Swift and I am over 21 years of age.
2. I have been incarcerated in the Michigan Department of Corrections since 1989.
3. In 2011, while I was serving time in the Newberry Correctional Facility, I began to have severe constipation. I began to go seven to eight days between bowel movements.
4. Prison medical staff attempted to treat me with laxatives, and then with enemas. After several weeks without improvement, I was transported to a local hospital where a golfball-sized cyst was discovered in my large intestine.

5. I was transferred to a larger hospital in Marquette, Michigan where I underwent surgery to remove the cyst and to place a temporary colostomy on or about June 2nd, 2011.
6. At the time I gave informed consent for the surgical procedure, I was told that the colostomy would be reversed within two to three months.
7. On or about August 4th, 2011, my assigned medical provider at the Newberry prison requested approval for a surgical consult for colostomy reversal. The request was denied on the basis that reversing my colostomy “was not medically necessary.”
8. After Newberry, I was transferred to Chippewa Correctional Facility (URF). My assigned medical provider at URF also submitted a request for a surgical evaluation for colostomy reversal, on or about November 27th, 2013. Again, the request was denied, because “there was no demonstration of medical necessity at this time, a colostomy is only reversed if there is a medical necessity.”
9. Due to a health problem unrelated to my colostomy, I was transferred from Chippewa Correctional Facility to Duane Waters Health Center, a

MDOC-operated medical facility that is located inside a larger prison complex in Jackson, Michigan.

10. I asked my medical providers at Duane Waters if they could submit a request for colostomy reversal surgery for me, but I was told that such a request would be futile, as a request to reverse a functional colostomy would never be approved.
11. From Duane Waters Health Center, I was transferred to G. Robert Cotton Correctional Facility in Jackson, Michigan. I saw a medical provider at that facility about my colostomy bag, and the provider submitted a request for a colostomy reversal surgery. That request was denied.
12. After a couple years at G. Robert Cotton, I was transferred to Lakeland Correctional Facility in Coldwater, Michigan. My medical provider at Lakeland, P.A. Ecoe Hill, also requested approval for a surgical consult for colostomy reversal, on or about September 15th, 2016. Again, the request was denied, due to: "medical necessity not demonstrated at this time."
13. After Coldwater, I was transferred to the Marquette Branch Prison in Marquette, Michigan. My medical provider at that facility, Dr. Joshua

Kocha, submitted yet another request for a surgical evaluation for colostomy reversal. Again, the request was denied.

14. In December of 2019, I was transferred back downstate to the Muskegon Correctional Facility. My current treating physician, Dr. Dale Ashe, submitted a 407 request for a colostomy reversal surgery in July 2020. That request was denied. About a week later, Dr. Ashe informed me that he had submitted a second 407 request for a consult with a general surgeon to determine if reversal was still feasible, given the length of time my rectal stump had been de-functional. That request was also denied.
15. On or about September 22, 2020, I submitted a healthcare kite to address bleeding from the bottom of my stoma and painful open sores that were being exposed to feces. I was seen by a visiting doctor from another facility the following day.
16. The visiting doctor submitted a 407 request for a consult with a general surgeon to address my bloody sores. This time, the request was approved.

17. On November 5, 2020, I was transported to the Mercy Health Mercy Campus in Muskegon, Michigan, where Dr. Theodore Vanderkooi, a general surgeon, performed a colonoscopy. Dr. Vanderkooi removed several polyps from my colon. He instructed me to cut smaller holes in my colostomy bag wafers, so that the wafer would be right up at the edge of the stoma and cover the area with the bloody sores. Dr. Vanderkooi also determined: “it does appear that he could undergo a colostomy takedown. Ideally he would lose 30 to 40 pounds to make postoperative care easier and decrease operative risk.”
18. I sent a healthcare kite sometime in the week after my colonoscopy appointment to request a colostomy reversal surgery. P.A. Hoover, a member of the prison medical staff, told me that she “put in a chart review” in regards to colostomy reversal.
19. On January 21, 2021, I had a telemedicine chronic care visit with a Dr. Sahdir. I asked Dr. Sahdir if she could check the status of the “chart review” to see if they had approved or denied the colostomy reversal surgery, or if they had approved contingent on me losing weight. She told me there was no need to check, since, “that’s just something they

are not going to do. They don't do reversals of functional colostomies.”

Or similar words to that effect.

20. I have now lived with a colostomy bag for over nine and a half years. I have sought a surgical consult for colostomy reversal every time I have been transferred to a new prison. Except for Duane Waters, medical staff at every prison have put in requests for surgical consults for colostomy reversal, and all of those requests have been denied.
21. Over the years, I have often had inflamed polyps on my stoma. They itch horribly, but I cannot scratch them because any contact will cause them to bleed.
22. If I touch or bump the stoma, the bag will fill up about a quarter to half-way full of blood. This happens approximately 4-5 times a week, usually because I bump into something while working in the prison kitchen.
23. My stoma also prolapses on a daily basis. I regularly have a half-inch to an inch of intestine hanging out of my body.
24. The liquid and gaseous discharge into the bag smells horrible, far worse than the smell of normal human waste. I have gotten into numerous fights with inmates who object to me emptying or cleaning my bag in the cell.

25. Every once in a while, my bag will come off while I am sleeping, and I wake up with wet feces all over my clothes, bedding, and body.
26. I have experienced nearly a decade of unnecessary pain, suffering, ostracization and humiliation due to being forced to live with a colostomy that was intended to be temporary and is reversible. Michigan's prison health care contractor has consistently refused to schedule me for a reversal surgery.

Further Affiant sayeth not.

Dated: January 29, 2021

Swift Keith 202475
Keith Labronzo Swift

NOTARY PUBLIC: 

TIM ANTES
Notary Public, Muskegon County, MI
My Commission Expires 11/07/25
Acting in the County of Muskegon